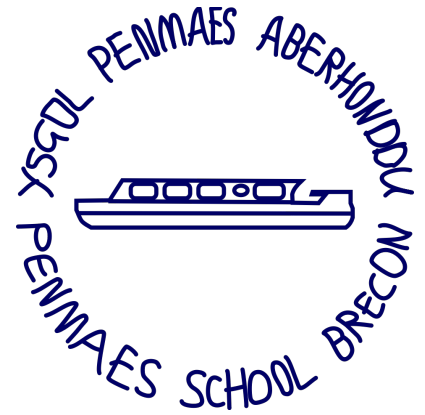




Ysgol Penmaes



Harmful Sexual Behaviours Policy

Policy Review

This policy will be reviewed as detailed in the school's policy review cycle. It may also be necessary to review and amend it sooner to reflect both local and national changes.

Ratified by Governing Body	Signature	Date
Headteacher: Angharad Bryn-Jones		19.4.23
Chair of Governors: Clancy Brett		19.4.23
Next review date: April 2024		

Ysgol Penmaes has high expectations in relation to keeping children in our care safe and ensure that the environment is safe and healthy. This policy applies to all staff and volunteers working in the school and its governors.

Educational settings play a key role in identifying and preventing harmful sexual behaviour.

What is Harmful Sexual Behaviour?

Harmful sexual behaviour (HSB) is developmentally inappropriate sexual behaviour displayed by children and young people, which is harmful or abusive to others.

Harmful Sexual Behaviour can include young people using explicit words or phrases, inappropriate touching, using sexual violence or threats, penetrative sex with other children. Children and young people can be exposed to harmful sexual behaviour both in person and online.

Harmful Sexual Behaviour is not defined by the age of children or young people. A younger child could sexually harm an older child if they over power them, such as if the older child has a disability. Power is a key factor in the reasons why young people display harmful sexual behaviours towards peers. Both girls and boys display harmful sexual behaviours.

There are 3 levels of behaviour to consider when responding to a concern:

Green Concern -Healthy Sexual Behaviours

- Mutual
- Consensual
- Exploratory and age appropriate
- No intent to cause harm
- Fun, humorous
- No power differential between participants.

Amber concern- Problematic Sexual Behaviours

- Displaying behaviours not age appropriate, such as invasion of personal space, sexual swear words in very young children
- Some 'one off' incidents of low- key behaviours such as touching over clothing
- Incidents where there is peer pressure to engage in the behaviour. For example touching someone's breast
- Behaviours are spontaneous rather than planned
- They may be self directed as masturbation
- The child or young person targeted maybe irritated or uncomfortable but not scared and feel free to tell someone
- Parents display concern and are interested in supporting the child to change.

Red Concern Harmful Sexual Behaviours

- Not age appropriate
- Elements of planning secrecy or force
- Targeted children feel fear/anxiety/discomfort
- Negative feelings are expressed by the young person and blames others
- Attempting/ forcing others to expose genitals
- Sexually explicit talk with others

Sexual harassment between children/ young people means ' unwanted conduct of a sexual nature' that can occur on and off line. Sexual harassment is likely to violate a child's dignity, and/or make them feel intimidated, degraded or humiliated .

Risk Factors

Children and young people can develop harmful sexual behaviours because of trauma or abuse. They may have experiences

- Physical abuse
- Emotional abuse
- Sexual abuse
- Severe neglect

- Parental rejection
- Family breakdown
- Domestic abuse
- Parental substance misuse

It is important to remember that being abused does not mean that children or young people will go on to abuse others.

This school recognises confidence, supportive peers, friends and good lines of communication with an emotionally available adult helps to safeguard children in our school. Therefore the school will

- Ensure that children, young people know that all adults in the school can be approached if they are worried or need to talk.
- Children are encouraged to talk and will be listened to.
- Build relationships with agencies ensuring early and appropriate referrals for support and interventions for individual children before the risk escalates.
- Whole school approach to incorporate HSB and preventative measures to support children and families.

ROLES AND RESPONSIBILITIES

Staff must read the school safeguarding and child protection policy and undergo annual safeguarding training.

Designated Safeguarding leads must ensure that staff understand how to report a concern regarding harmful sexual behaviour, sexual violence or harassment (using the relevant forms)

Staff must challenge any discriminatory language or inappropriate behaviour by using the SDSE approach

S- stop

D- define

S- state the school rules

E- enforce and redirect

Staff must report harmful sexual behaviour, sexual violence or sexual harassment to the safeguarding lead immediately and document this on the relevant form (appendix 1)

The head teacher must ensure that a preventative approach is taken and that all pupils are educated around the risks associated with grooming, online safety and sex education. A plan may need to be put in place (appendix 2).

INTERVENTION

Intervention programmes should be tailored to meet the individual needs of each child or young person taking into account the level of concern.

RECORD KEEPING

Accurate, clear and timely record keeping is important and is therefore imperative that a full record is made of all discussions, actions and decisions taken.

FURTHER INFORMATION

Harmful Sexual Behaviour – NSPCC Research and resources
<https://learning.nspcc.org.uk/health-safeguarding-child-protection>



Appendix 1

Sexualised behaviours Recording Form

Form to be completed by the person who witnessed the incident or had the incident reported to them. This can be done with support, e.g. from the safeguarding lead.

BEHAVIOUR RECORDING FORM NUMBER:	
Details of child/young person	
Name:	
DOB:	
Any specific vulnerabilities:	
Any other behavioural concerns:	
Any other previous incidents of sexualised behaviour:	
Details of the Incident: <i>Detail anything of note that took place before the behaviour. Describe in detail what was observed or reported. Use quotation marks to describe the child's/children's words. Avoid terms such as 'inappropriate touch, sexualised behaviour' etc. as they are too vague.</i>	
Other significant factors:	

Describe if there was any observed planning, physical force, coercion, secrecy, any adult sexual behaviour i.e. not age appropriate. Oral, penetration/attempted penetration or mutual, consenting, light hearted, sexual behaviour, exploratory.

Power imbalances:

Describe any power difference between the children/young people involved in the incident, e.g. age, relationship, social status, developmental differences, size, learning disabilities, physical disabilities etc.

Reaction of the children/young people involved in the incident:

*Describe individually for all children involved e.g. fear, tearful, anxiety, happy, playful, embarrassed, angry, regretful, taking responsibility.
Anonymise where necessary when attaching the recording to an individual's school records.*

Behaviour management:

*How was behaviour addressed in the immediacy? Was SDSE used/discussed?
How will the behaviour be addressed in the future, e.g. whole class/school response – PANTS, pastoral support?
Report/referral to other agencies, including social care.
What support will be offered if necessary to the children/young people involved?*

Reaction of parents/carers:

*Record individually the parents/carers' reactions for each child – you may need to record their initial response and their subsequent response. For example, a parent may react negatively initially, but then responds in a more supportive manner in time.
Supportive/concerned/caring/rejecting/angry/shocked.
Have they similar concerns at home?*

Anonymise where necessary when attaching the recording to an individual's school records.

Completed by:

Date:

Appendix 2

Safety plan

Name of child/young person:	
Date of birth:	
School/education setting:	

1.4 What interventions/consequences are already in place or have taken place:
Restrictions on activities/movement around the school, one-to-one work or whole school/class work, specialist services.

1.5 Child's views regarding their sexual behaviour and other behavioural concerns:
Do they understand the concerns, do they deny or accept the behaviours, are they embarrassed, angry, remorseful etc?

1.6 Parent's/carer's views regarding child's sexual behaviour and other behavioural concerns:
Are they angry, rejecting, supportive, minimising, concerned?

2 Identifying risks

2.1 Record any known triggers to the behaviour:
Particular lessons, activities, peers, staff and events outside of school.

Where identified, detail strategies to reduce triggers:
What supervision is available to support the young person, can the child identify triggers to the behaviour?

<p>2.2 Identify any risky locations in the school: <i>Toilets, unsupervised areas, corridors, playgrounds etc.</i></p>
<p>Where risky locations are identified, detail plans to minimise risk: <i>Using different toilets/toilet times, additional supervision? No-go areas for child/young person?</i></p>
<p>2.3 Identify any others who may be particularly vulnerable: <i>Include staff, visitors and other children and, maintaining appropriate confidentiality, detail why they might be vulnerable</i></p>
<p>Where vulnerable individuals have been identified, detail plans to minimise risk: <i>Supervision, assessing suitability for contact activities, consideration of classroom seating arrangements, consider whether one-to-one work is appropriate.</i></p>
<p>2.4 Identify any risky activities: <i>RSE lessons, school trips, PE, including getting changed/contact sports, residential stays.</i></p>
<p>Where identified, detail strategies to minimise risk: <i>Supervision, changing in different room, conducting activities safely without supervision</i></p>

<p>2.5 Explore child's/young person's access to internet/media and any associated risks, including personal devices: <i>Is access monitored and supervised, are safety settings/filters applied, is access available in unstructured time, are personal devices accessible during the day?</i></p>
<p>Where identified, detail strategies to minimise risk: <i>Supervised access, use of filters, no personal devices, whole school online safety.</i></p>
<p>2.6 Explore and record transport arrangements to and from school: <i>Walking, bus, car, shared transport arrangements. Include whether the child is transported by the local authority, whether they are transported with other children, what the supervision arrangements are, is the person supervising (e.g. taxi driver) aware of the potential risks and is there an appropriate person to manage them, consider whether the child/young person should be transported individually or with additional supervision.</i></p>
<p>Where concerns are identified, detail actions/changes required to transport arrangements:</p>
<p>3 Strengths</p>

3.1 Identify areas/locations within the school that are not assessed as requiring additional planning/supervision at this time:
Please note areas where there has been no history of incidents or concerns, or where existing supervision manages risk.

3.2 Please describe positive relations the child has:
Include professionals, family, peers etc.

3.3 Please note activities/lessons the child enjoys and engages in positively:
Describe how these will be promoted and maintained
Consider any additional activities that could be encouraged to promote prosocial behaviour and self-esteem.

3.4 Please identify positive attributes/characteristics/skills the child possesses which can be promoted to help them meet their emotional needs in a healthy way:

4. Implementation

4.1 Who needs to know about this plan:
Consider lunchtime supervisors, teaching staff, volunteers, contractors, governors.
Who will share this information and when?

4.2 Work to be undertaken with the young person and wider school population:
Include one-to-one work, e.g. emotional literacy, communication skills, empathy work, NSPCC Underwear Rule, online safety, RSE.
Note whether this is individual or wider school work.

4.3 Referrals for external support:
Specialist services, e.g. CAMHS, NSPCC. Note any identified need, e.g. safeguarding, therapeutic support. Who will make the referral and timescales?

5 Measuring risk

5.1 How will you measure whether the level of risk has changed:
This may include:

- *change in the child's view regarding their behaviours*
- *reduction or increase of incidents of sexual behaviours*
- *reduction or increase in other concerning behaviours*
- *reduction or increase of prosocial behaviour/activities*

5.2 Review date:
The plan should be reviewed every three months or if there is a further event that impacts on risk.

Signatures of attendees:

